(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

RECEIVED

PLEASE PRINT

JUL 25 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s): Lisa K. Shapiro, Ph.D.; Paul A. Worsowicz

		ER, CALLAHAN &		
		th Main Street, Cond		
603-228-		603-226-3334	shapir	ro@gcglaw.com
(Teleph	one)	(Fax)		(Email)
	vers: (Choose one – file s ansactions which are not s			file a separate report for
X All reportable to	ransactions occurring in the	e month prior to the re	porting date relative to the	following client.
	PLANNED PARE	NTHOOD OF NORT	THERN NEW ENGLAN	D
	(Full Name of Client as	it appears on the Lob	byist Registration Form)	
OR				
All reportable to	ransactions by the lobbyist particular client.	(including the lobbyis	t's family), or the lobbyin	g firm listed below which are
IV. Date of Report:	April 25, 2018		July 25, 201	8 🗵
The state of the s	tivity from date of registra	tion to 3/31/18	activity from 4/1/18 i	
	October 31, 2018		January 30,	2019 🗆
	activity from 7/1/18 to 9/3		activity from 10/1/18	to 12/31/18
	o fees received and no rep complete just this form and			
VI. Check if addition	nal reports are attached: eived fees or made expendi	tures, you must file A	ddendum A – Fees and E	xpenses
Expense Reimb		-		
		political contribution	s, you must file Addendu	m C - Political Contributions
Sworn Statement/Affi I have read RSA 15, RS to the best of my know	SA 15-B and RSA 664 and	hereby swear or affirm	n that the foregoing inform	nation is true and complete
Ik	2		7-18-	18
- / ·				



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Lisa K. Shapiro, Ph.D.; Paul A. Worsowicz		<u> </u>
II. Name of lobbyist's partnership, firm or corporation, if any:		
GALLAGHER, CALLAHAN & GARTRI	ELL, P.C.	
(Name of partnership, firm or corporat	ion)	
III. Name of Client PLANNED PARENTHOOD OF NORTHERN NEW ENGLAND	Date July	25, 2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified above lobbying, including fees for services such as public advocacy, government relinctuding research, monitoring legislation, and related legal work. The gross by any expenses:	ations, or public	relations services,
a) Total of all fees received in this reporting period	a) \$	5,000
b) Total of all fees received this calendar year, prior to this reporting period. (This should equal the total prior monthly reports for this calendar year.)	b) \$	10,500
c) Total of all fees received to date. (Add lines a and b)	c) \$	15,500
d) Indicate the amount of any such fees that are due, but have not yet been paid.	d) \$	2,500
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each of lobbyist(s)/firm that are unrelated to any one client a separate report may be are to be reported in one of three categories of expenses: (a) the aggreg reporting period for salaries, benefits, support staff, and office expenses; expenses where the expenditure was of \$25.00 or less (for example: meals purchase of a ceremonial object given to a person being lobbied with a value statement of each individual expenditure made during this reporting period of covered by (a) (for example: purchase of a meal with value of greater than \$25, but not gre legislative reception). Expenses for honorariums, expense reimbursement, on separate addendums and should not be reported on Addendum A.	lient and if experience filed for the lobate total of all experience for the aggregate our chased during that is given to the of \$25.00 or less greater than \$25, purchase of a ater than \$50, results.	nditures are made by byist(s)/firm. Exp xpenses paid during total of all individual business lunch the person being lobess); and (c) an iter 5.00 for any purpost ceremonial object estaurant expenses
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported	a) \$ b) \$	5,500.0
in a), of \$25 or less.		.0
	c) \$	

Client: PLANNED PARENTHOOD OF NORTHERN NEW ENGLAND d) Total expenses for this reporting period. (Add lines a, b and c.) d) \$ 5,500.00 e) Total of expenses paid this calendar year, prior to this reporting period. (This should be the amount on line f of addendum A for last month's report.) e) \$ 7,500.00 f) Total of all expenses year to date. f) \$ 13,000.00 VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged. Paid to: Amount Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

Lobbyist Fees & Expenses, Addendum A - Page 2

(Signature of lobbyist)

Lisa K. Shapiro, Ph.D. (Print Name of Lobbyist)

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

	Affirmation by Lobbyist me and Expenses for:		
Name of Lobbying	partnership, firm or corpora	ation: GALLAGHER, CAL	LLAHAN & GARTRELL, P.C.
Name of Client (lea particular client):		the partnership, firm, or con Northern New England	rporation and not related to any
Date of Report (che	eck one):		
April 25, 2018 🗆	July 25, 2018 🗵	October 31, 2018	January 30, 2019 □
	• • • • •	Statement of Income and Exement (insert the number of	penses described above, and the Addendum forms being
1 Addendum A	(s).		
0 Addendum B(s).		
0 Addendum C	s).		
	ffirm that the foregoing info t of my knowledge and beli		nd each Addendum is true and
(Signature of Lobb	Worsowy yist)		7-17-18 (Date)
Paul A. Worsowic (Print Name of lob		<u></u>	